FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

DOCUMENT #
1. Corporation Name P94000081849

EXPRESS SECURITY 1 6854 WEST FLAGLER MIAMI, FLORIDA 331	STREET			
Principal Place of Business 6854 W. FLALER ST. MIAMI, FL 33144	Mailing Address 6854 W. Fl MIAMI, FL			
			3. Date Incorporated or Qualified 11-7-94	3a. Date of Last Report
2. Principal Place of Business	2a. Mailing Address		4. FEI Number	Applied For
21	26		65-0532758	Not Applicable
Suite, Apt. #, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
City & State	City & Crate			Fee Required
23	City & State		6. Election Campaign Financing	\$5.00 May Be
Zip Country	Zip	Country		Added to Fees
24 25	29	Country 30	8. This corporation has liability for inte	
	Current Registered Agent	100	Florida Statutes X Yes 10. Name and Address of New Reg	
GERARDO GUADAGN		81 Name	100 Manual Audiess Of New Neg	nstereo Agent
6854 W. FLAGLER		82 Street Addr	ess (P.O. Box Number is Not Acceptable)	
MIAMI, FL 33144		83		
•				
,		84 City		85 Zip Code
11. Pursuant to the provisions of Sections 60 or registered agont, or both in the State familiar with, all of the Unifications of SIGNATURE Signature (1) or publications of registered agont in the Company of the Co		98, the above-named corpora ed by the corporation's board. It: Registered Agent algorithm required		4.73.30
12. OFFICE	RS AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICE	DATE BS AND DIRECTORS IN 12
PRES.	DELETE	1. 1 TITLE		Change Addition
NAME GERARDO GUAD	AGNO	1.2 NAME		
STREET ADDRESS 20409 S.W. 8	6тн ст.	1.3 STREET ADDRESS		
CITY-S1-7IP MIAMI, FL 33	189	1.4 CITY-ST-ZIP		
SECRETARY	☐ DELETE	2 1 TITLE		Change Addition
NANCY GUADAG	NO	2.2 NAME		— ,
STREET ADDRESS 20409 S.W. 8	6TH CT.	23 STREET ADDRESS		
CITY-SI-ZIP MIAMI, FL 33		2 4 C/TY - ST - ZIP		
TITLE	DELETE	3. 1 TITLE		☐ Change ☐ Addition
NAME STREET ADDRESS		3.2 NAME		
CITY-SI-ZIP		3.3. STREET ADDRESS		
TIFLE	E3 bustr	3.4 CITY-S1-ZIP		
NAME	☐ DELETE	4.1 TITLE		Change Addition
STREET ADDRESS	1	4.2 NAME	90000180; -05/01/9601017	?'5 <u>,9</u> 9
City-SI-ZIP		4.3 STREET ADDRESS	***200.00	
TILE	[] DELETE	4.4 CHY-SY-ZIP	<u> </u>	34
NAME	L. Dicerre	5 1 TITLE		Change Addition
STREET ADDRESS		5.2 NAME	•	
CHY-ST-ZIP		5.3 STREET ADDRESS		
TITLE	☐ DELETE	5.4 CITY - ST - 7IP 6. 1 TITLE		
NAME /	_ one c	6.2 NAME		Change Addition
STREET ADDRESS		· ·		488
DITY - ST - ZIFI		6.3 STREET ADDRESS		11 20 90
 I do hereby certify that the information sup- certify that the information indicated on this 	plied with this filing is voluntarily furnis	6.4 CITY-ST-ZIP shed and does not qualify for	the exemption stated in Section 119 07/9	T-50-76

or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name others and address. oath, that I am an officer or director of the corporal appears in Block 12 or Block 13 Achtenged, or or a

SIGNATURE:

NO TYPED OR ARINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-22-96 (305)255-9755